

STATEMENT OF ECONOMIC INTERESTS

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MAR 22 2011

CITY OF PORTERVILLE
CITY CLERK OFFICE

2011 MAR 25 AM 1:41

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
HAMILTON CAMERON J.

1. Office, Agency, or Court

Agency Name

City of Porterville

Division, Board, Department, District, if applicable

Your Position

City Council; RDA; PFA; PIC; Planning Commission

Member

► If filing for multiple positions, list below or on an attachment.

Agency: TCAG; Tulare Co. LAFCO; Indian Gaming LCBC

Position: Alt. Member & Member

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of Tulare

☒ City of Porterville

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed March 22, 2011
(month, day, year)

Signature

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Hamilton, Cameron J.

▶ NAME OF SOURCE McCormick, Kabot, Jenner & Lew ADDRESS (Business Address Acceptable) 1220 West Main Street, Visalia, CA 93291 BUSINESS ACTIVITY, IF ANY, OF SOURCE Law Firm <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>9 / 16 / 10</td> <td>\$ 168.00</td> <td>Dinner</td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	9 / 16 / 10	\$ 168.00	Dinner	/ /	\$		/ /	\$		▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	/ /	\$		/ /	\$		/ /	\$	
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